Attorney or Party Name, Address, Telephone & FAX Numbers, and California State Bar Number	FOR COURT USE ONLY					
UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA						
In re:						
	CHAPTER					
	CASE NUMBER					
Debtor.	(No Hearing Required)					
NOTICE OF TRUSTEE'S/DEBTOR-IN-POSSESSION'S REQUEST FOR A COPY OF PROOF OF CLAIM						
1. TO (specify name):						
2. NOTICE IS HEREBY GIVEN that the undersigned Trustee or Debtor-in-Possession in the above-entitled case hereby requests, pursuant to Local Bankruptcy Rule 3007-1, that you produce a copy of the Proof of Claim filed by you in this case. You should mail or deliver a complete copy of your Proof of Claim, including all attached documentation, to the address set forth below within 20 days after the date of this request. Failure to comply with this request may constitute grounds for objection to your claim based upon inadequate documentation.						
3. Please mail or deliver your Proof of Claim to:						
Dated:						
Dutou.						
Type Name of Trustee or Attorney for Trustee/Debtor Signatu	ure of Trustee or Attorney for Trustee/Debtor					

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Notice of Trustee's/Debtor-in-Possession's	Request for a Copy of Proof of CI	aim - Page 2

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In re		CHAPTER				
De	btor.	CASE NUMBER				
PROOF OF SERVICE BY MA	PROOF OF SERVICE BY MAIL					
STATE OF CALIFORNIA COUNTY OF						
I am employed in the above County, State of California. I am over the age of business address is as follows:	of 18	and not a party to the within action. My				
On, I served the foregoing document des	cribe	ed as: NOTICE OF TRUSTEE'S/ DEBTOR-				
IN-POSSESSION'S REQUEST FOR A COPY OF PROOF OF CLAIM on the interaction by placing a true and correct copy thereof in a sealed envelope with post						
Mail at, California, addressed						
		Addresses continued on attached page				
I declare under penalty of perjury under the laws of the United States of Amer	ica th					
	*1					
Dated:						
Type Name Sig	natui	re				
Type Marile Sig.	ialui					